PTO/SB/17 (07-06)
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Effective on 12/08/2004.	Complete if Known			
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/681,199-Conf. #9233 October 9, 2003 Juha KERE J. A. Goldberg 1634		
FEE TRANSMITTAL	Filing Date			
For FY 2006	First Named Inventor			
<u> </u>	Examiner Name			
X Applicant claims small entity status. See 37 CFR 1.27	Art Unit			
TOTAL AMOUNT OF PAYMENT (\$) 930.00	Attorney Docket No.	0933-0214P		

TOTAL AMOUNT OF PAY	MENT	(\$) 930.00	Α	ttomey Docket	No. C	0933-0214P				
METHOD OF PAYMENT (check all that apply)										
X Check Credit C		Money Order	None None Deposit Accour		please identi Birch, Ste	ify): wart, Kolasch	n & Birch, Ll	LP		
For the above-ident										
Charge fee(s)						icated below, e		e filing fee		
Charge any a		e(s) or underpay 6 and 1.17	ments of	x Credit	any overpa	yments				
FEE CALCULATION	·									
1. BASIC FILING, SEARCH					=><					
	FILI	NG FEES Small Entity	SEAR	CH FEES Small Entity	EXAMIN	ATION FEES Small Entity	j			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Pa	aid (\$)		
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	- 0				
2. EXCESS CLAIM FEES Fee Description							<u>Fee (\$)</u>	Small Entity Fee (\$)		
Each claim over 20 (includi	•	,					50	25		
Each independent claim over	er 3 (includ	ling Reissues)					200	100		
Multiple dependent claims							360	180		
	Claims	Fee (\$)	Fee Pai	d (\$)		Itiple Depend				
8 - 20 = HP = highest number of total clai	me paid for it	creater than 20			<u>Fee</u>	<u>e (\$)</u>	Fee Paid (\$)	!		
-	Claims	-	Eas Bai	d (\$)		 -		_		
3 -3=	X X	Fee (\$) =	Fee Pai	u (a)						
HP = highest number of independ	dent claims p	aid for, if greater tha	n 3,							
B. APPLICATION SIZE FEE								_		
If the specification and dra listings under 37 CFR sheets or fraction there	1.52(e)), th	e application siz	e fee due i	s \$250 (\$125 f	onically file or small en	ed sequence or tity) for each a	computer dditional 50			
	ktra Sheets			itional 50 or frac	tion thereof	Fee (\$)	Fee P	aid (\$)		
100 =		/50	(ro	ound up to a who	ie number) 🤉	×	=			
I. OTHER FEE(S)							Fees F	Paid (\$)		
Other (e.g., late filing surcharge): 1808 Processing fee, except in provisional applications					130.00					
2252 Extension for response within second month 2801 Request for continued examination (RCE) (see 37				nth	225.00					
1806 Submission of an Information Disclosure Statement				Statement	395.00 180.00					
SUBMITTED BY // /			<u> </u>							
ignature // ///	11/11/11	na A		gistration No.	28,977	Telephone	(703) 205	-8000		
Name (Print/Type) Gerald M	Murphy	Jr / //	(AI	tomey/Agent)		Date	February 2			
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